Counseling the Wounded Healer: A Faith–Temperament Framework for Understanding Compassion Fatigue in African Pastoral Ministry

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Abstract

Pastoral ministry is sustained by compassion, yet the repeated demand to enter the pain, crises, conflicts, and spiritual struggles of others can gradually deplete the emotional resources of the caregiver. This conceptual article examines compassion fatigue and burnout among African pastors through the intersecting lenses of pastoral theology, clergy well-being, spirituality, and temperament-informed counselling. The discussion is particularly situated within Ghanaian Christian ministry, where pastors often function simultaneously as preachers, counsellors, administrators, mediators, spiritual leaders, and community caregivers. Research on clergy health confirms that high role expectations, emotional demands, insufficient boundaries, work-family tensions, limited support, and inadequate self-care contribute to pastoral exhaustion. Ghanaian evidence similarly demonstrates significant relationships among pastoral stress, burnout, and reduced quality of life. Building on the theological image of the wounded healer, the article proposes the **Faith–Temperament Integration Model (FTIM)** as a six-movement pastoral counselling framework comprising spiritual grounding, temperament awareness, emotional processing, cognitive and spiritual reframing, relational and ministerial renewal, and continuing formation through supervision. The model employs temperament as a pastoral self-understanding framework rather than as a diagnostic substitute for validated psychological assessment. It further argues that Christian spirituality can support resilience when it nurtures grace, rest, meaning, community, and healthy limits, but may become harmful when exhaustion is spiritualized or help-seeking is interpreted as weak faith. The article concludes that sustainable ministry requires pastors to receive the care they continually extend to others. Caring for the shepherd is therefore not a retreat from ministry but an essential dimension of faithful pastoral stewardship.

Keywords: compassion fatigue; pastoral burnout; temperament; African pastoral counselling; clergy well-being; Faith–Temperament Integration Model

Introduction

Pastoral ministry is a vocation of presence. Ministers enter hospital rooms, bereaved homes, troubled marriages, family conflicts, financial crises, spiritual struggles, and moments of profound human vulnerability. They preach hope while carrying the private grief of those entrusted to their care. They are expected to remain emotionally available when others withdraw, spiritually confident when communities are afraid, and relationally steady when families and congregations are in turmoil.

Yet the pastor who repeatedly carries the burdens of others remains human.

The original manuscript from which this article is developed captures this pastoral paradox powerfully: pastors may comfort the grieving while carrying their own grief, counsel wounded people while concealing personal wounds, and continue ministering even when their own emotional and spiritual reserves are becoming depleted.

This paradox is appropriately described through Henri Nouwen's image of the **wounded healer**. The wounds of the caregiver need not disqualify ministry; indeed, suffering may deepen empathy and tenderness. But wounds that remain unacknowledged, unsupported, or untreated can also diminish the caregiver's capacity to remain emotionally present.

Contemporary research supports the seriousness of clergy occupational distress. Reviews of clergy burnout identify high role expectations, inadequate boundaries, limited relationships outside congregational life, lack of peer or mentoring relationships, and difficulties in sustaining personal spirituality among important contributors to burnout and resilience (Jackson-Jordan, 2013). Proeschold-Bell et al. (2011) likewise proposed a holistic model of clergy health in which stress, relationships, institutional conditions, coping practices, and self-care interact rather than operate independently.

The issue has particular relevance within Ghana. Fia et al. (2022), studying 254 Assemblies of God pastors in the Ashanti Region, found that participants reported stress associated with inadequate resources, competing family and ministry demands, multiple simultaneous responsibilities, and delayed ministry goals. Respondents also reported emotional exhaustion and burnout, and both stress and burnout were negatively associated with quality of life.

The concern, therefore, is not whether committed pastors become tired.

The more important question is what happens when **ordinary tiredness becomes chronic emotional depletion, relational withdrawal, spiritual numbness, diminished compassion, or inability to recover**.

This article addresses that question through pastoral counselling and temperament-informed self-understanding. It does not claim that temperament alone explains compassion fatigue. Nor does it propose that spiritual practices replace psychological assessment or professional care. Rather, it develops the **Faith–Temperament Integration Model (FTIM)** as a conceptual framework through which pastors may understand their vulnerabilities, recover healthier rhythms, and rediscover ministry as service flowing from grace rather than exhaustion.

Compassion Fatigue, Burnout, and the Cost of Caring

The language surrounding caregiver exhaustion requires careful distinction.

Burnout generally develops through prolonged occupational stress and may involve emotional exhaustion, reduced effectiveness, detachment, cynicism, and a diminished sense of accomplishment.

Compassion fatigue is often used more specifically to describe distress associated with sustained exposure to the suffering of others. Contemporary professional-quality-of-life literature frequently places compassion fatigue in relation to both burnout and secondary traumatic stress, while distinguishing these from **compassion satisfaction**—the fulfilment that may arise from helping others.

These concepts overlap, but they should not be treated as identical.

This distinction is particularly useful in pastoral ministry because a minister may continue to love the vocation while becoming emotionally depleted by repeated exposure to other people's crises. Another pastor may experience occupational burnout through institutional conflict, excessive workload, lack of resources, unrealistic congregational demands, or work-family tension without significant secondary trauma.

Pastoral care scholar Daniël Louw (2015) describes compassion fatigue as part of the spiritual and existential cost of caregiving, arguing that prolonged ministry to suffering people may create a depleted sense of being in the caregiver.

The pastoral counsellor must therefore resist reducing every tired pastor to a single diagnosis.

The question is not merely, **"Are you exhausted?"**

It is also:

What kind of exhaustion is this?

What has produced it?

How long has it continued?

What is happening emotionally?

What is happening physically?

What is happening within the pastor's family?

Has exposure to traumatic material accumulated?

Are there symptoms of anxiety or depression?

How is the pastor sleeping?

What has happened to the minister's relationship with God?

What expectations are being carried?

What boundaries are absent?

What support exists outside ministry?

The wounded healer requires careful listening before theological interpretation.

The African Pastor and the Burden of Multiple Roles

Pastoral leadership within many African Christian communities extends well beyond preaching.

The pastor may simultaneously function as spiritual director, marriage counsellor, conflict mediator, crisis responder, financial adviser, family elder, prayer leader, community advocate, administrator, and trusted confidant.

Such relational breadth can be one of African ministry's great strengths.

It can also become a source of relentless demand.

The Ghanaian evidence is instructive. Fia et al. (2022) found that pastors in their sample reported stress from financial and infrastructural limitations, ministry-family competition, multiple responsibilities, and pressure surrounding ministry goals. Pastors also reported feeling emotionally drained and burned out.

These findings lend empirical weight to what pastoral experience has long observed: ministry strain is rarely produced by one dramatic event.

It accumulates.

One funeral.

One struggling marriage.

One counselling emergency.

One financial problem.

One accusation.

One midnight call.

One leadership conflict.

One family responsibility postponed because somebody else's family is in crisis.

No single event necessarily destroys the caregiver. The danger lies in repeated expenditure without adequate restoration.

The pastor may continue functioning outwardly long after inward reserves have become dangerously thin.

When Exhaustion Becomes a Spiritual Problem

One of the most painful features of pastoral burnout is the guilt that may accompany it.

Pastors are not only tired.

They may feel guilty for being tired.

Within highly spiritualised ministry environments, exhaustion may be interpreted as inadequate prayer, insufficient anointing, spiritual attack, or loss of commitment.

The original manuscript rightly identifies this tendency within some Ghanaian ministry settings, where pastors may respond to emotional depletion simply by increasing fasting, prayer, and ministerial effort rather than seeking rest, counselling, medical evaluation, or structured support.

Prayer is not the problem.

The problem occurs when prayer becomes a way of refusing human limitation.

Spirituality can be deeply protective. Chandler's (2010) qualitative study of pastors found that particular spiritual practices contributed meaningfully to emotional and spiritual well-being. Yet spirituality can become maladaptive when ministers conclude that dependence upon God requires them to deny bodily exhaustion, emotional pain, or legitimate need for help.

Jesus' own ministry resists such a theology of perpetual availability.

The Gospels portray Christ serving intensely while also withdrawing, sleeping, praying privately, receiving hospitality, and creating distance from crowds. Christian ministry is sacrificial, but sacrifice is not identical with the destruction of the servant.

Rest can therefore be understood theologically as stewardship.

The Wounded Healer Reconsidered

Nouwen's image of the wounded healer remains compelling because it challenges the fantasy that caregivers must first become invulnerable before helping others.

A pastor may counsel bereaved people more tenderly because grief has entered his own life.

A minister who has experienced failure may become gentler toward people ashamed of their mistakes.

A counsellor who has received counselling may become less defensive about the vulnerability required to seek help.

The danger lies not in being wounded.

It lies in assuming that every wound has already become wisdom.

Unprocessed wounds can distort care.

A pastor with unresolved abandonment may become excessively dependent upon congregational approval.

A minister with an unprocessed authoritarian upbringing may control church members in the name of leadership.

A caregiver with unresolved grief may overidentify with grieving counselees.

A pastor who has never learned to say no may confuse exhaustion with faithfulness.

The wounded healer therefore needs healing too.

Theologically, weakness becomes redemptive not because pain is automatically holy, but because pain can be brought into truth, grace, relationship, and transformation.

Temperament as a Pastoral Lens

The source manuscript proposes temperament as a significant lens through which pastoral responses to stress may be explored. It particularly draws upon the Arno Profile System (APS), which conceptualises temperament through the behavioural areas of **Inclusion, Control, and Affection**.

For scholarly clarity, an important qualification is necessary.

In this article, temperament is used as a **pastoral self-understanding and counselling framework**, not as a psychiatric diagnosis, medical assessment, or substitute for empirically validated measures of burnout, trauma, depression, anxiety, or professional quality of life.

This distinction strengthens rather than weakens the model.

The pastoral value of temperament lies in asking questions such as:

How much interpersonal engagement energises or exhausts this minister?

How does this pastor respond to responsibility and control?

How readily does this person disclose emotional needs?

What forms of affirmation matter?

Does this minister withdraw under stress?

Does the pastor become controlling?

Does the pastor become increasingly approval-seeking?

Does the pastor avoid confrontation?

How does personality interact with boundaries and recovery?

The model's traditional temperament categories may then function as heuristic portraits rather than deterministic labels.

Sanguine patterns

A pastor with strongly sociable and expressive tendencies may thrive on congregational interaction, public ministry, and relational affirmation.

The strength is warmth.

The vulnerability may be overextension.

Such a minister may keep accepting invitations, counselling appointments, social engagements, and speaking responsibilities because interaction itself is rewarding—until the body begins to demand what enthusiasm has ignored.

Melancholic patterns

A reflective, conscientious, perfectionistic, or deeply empathic minister may provide careful pastoral care.

The strength is depth.

The vulnerability may be emotional saturation, rumination, self-criticism, or unrealistic standards.

A single pastoral failure may remain emotionally active long after the congregation has forgotten it.

Choleric patterns

A highly task-oriented and decisive pastor may carry enormous responsibility and remain effective under pressure.

The strength is leadership.

The vulnerability may be difficulty recognising limits.

Rest can feel unproductive.

Delegation may feel risky.

Vulnerability may feel like loss of authority.

Eventually the minister's strength becomes the route into exhaustion.

Phlegmatic patterns

A calm and accommodating minister may stabilise congregations during conflict.

The strength is steadiness.

The vulnerability may be avoidance of confrontation and suppression of personal needs.

Fatigue may appear not as visible breakdown but as emotional withdrawal.

Supine patterns

Within the APS framework, the Supine pattern emphasises service, relational responsiveness, and a strong desire to be wanted while sometimes struggling to communicate needs directly.

The strength is service.

The vulnerability may be giving extensively while silently hoping others will recognise needs that have never been clearly expressed.

Resentment can then grow beneath humility.

The pastoral usefulness of these patterns lies not in placing ministers into boxes but in helping them recognise a simple truth:

Different people become depleted in different ways.

From Temperament to Self-Awareness

One of the central insights of the proposed FTIM is that **self-awareness is stewardship**.

Pastors frequently receive theological training in biblical interpretation, doctrine, preaching, church administration, and ministry leadership.

Far fewer are taught to interpret themselves.

Yet every minister brings a self into ministry.

A history.

A family system.

An attachment pattern.

A personality.

A need for approval.

A relationship with authority.

A tolerance for conflict.

A threshold for stimulation.

A pattern of emotional expression.

A way of responding to disappointment.

When the pastor does not understand these dimensions, what appears to be spiritual zeal may sometimes be driven by unresolved psychological needs.

The minister who must always be needed may call dependency "pastoral commitment."

The leader who cannot delegate may call control "excellence."

The pastor who fears displeasing members may call weak boundaries "servanthood."

The person who suppresses every emotion may call avoidance "spiritual maturity."

Counselling creates a compassionate space in which these patterns can be examined without humiliation.

The Faith–Temperament Integration Model

The **Faith–Temperament Integration Model (FTIM)** is proposed here as a six-movement conceptual approach to pastoral renewal.

It is not yet an empirically established treatment protocol. The stages should therefore be regarded as a framework for pastoral counselling, supervision, and future research rather than a validated clinical sequence.

1. Spiritual Grounding and Identity

Compassion fatigue frequently distorts pastoral identity.

The minister begins to believe:

I am what I produce.

My worth depends upon church growth.

I must always be available.

If people are disappointed in me, I have failed God.

If I rest, ministry will collapse.

The first movement of FTIM therefore concerns identity before intervention.

The pastor is invited to rediscover the difference between **being called** and **being consumed by the call**.

Biblically, Psalm 23 is striking because the shepherd becomes a sheep.

The minister who repeatedly says, "The Lord is my Shepherd" must also accept what those words imply: the shepherd of others is himself dependent.

This movement may incorporate spiritual history, prayer, Scripture meditation, examination of ministry beliefs, and exploration of the pastor's relationship with God.

But it should also include psychological assessment where indicated.

Spiritual grounding does not remove the need to evaluate depression, anxiety, trauma symptoms, sleep disturbance, substance use, medical conditions, or suicidal ideation.

2. Temperament and Personal Pattern Awareness

The second movement explores habitual patterns of relating, leading, receiving affection, handling conflict, and responding to stress.

Where the APS is used, it may help organise pastoral reflection around Inclusion, Control, and Affection.

The purpose is not to tell the pastor:

"This is what you are and therefore you cannot change."

It is to ask:

"Given your characteristic patterns, where are your strengths becoming liabilities under sustained stress?"

A socially expressive pastor may need reduced interpersonal demand.

A highly private pastor may need intentionally structured support.

A controlling leader may need delegation.

A pastor uncomfortable expressing need may need assertiveness.

A deeply empathic counsellor may need stronger emotional boundaries.

Temperament awareness should therefore lead toward flexibility rather than fatalism.

3. Emotional Processing and Lament

Pastors are accustomed to receiving other people's emotions.

They may be much less practised at expressing their own.

This third movement creates space for grief, anger, fear, shame, disappointment, betrayal, loneliness, and exhaustion to become speakable.

Christian counselling has a rich biblical resource for this work: **lament**.

The Psalms do not require sufferers to pretend.

Elijah does not emerge from despair through rebuke alone.

Job's pain is not healed by slogans.

Jesus Himself weeps.

The pastoral counselling room should therefore become a place where ministers are not required to perform spirituality.

A pastor should be able to say:

"I am angry."

"I am disappointed."

"I am tired of people."

"I feel nothing when I preach."

"I resent my congregation."

"I am afraid my ministry is failing."

"I don't want another telephone call."

Such honesty is not necessarily apostasy.

Sometimes it is the beginning of recovery.

4. Cognitive and Spiritual Reframing

Burnout is often sustained not only by workload but by deeply held beliefs.

Everyone needs me.

Good pastors never say no.

God expects me to be available at all times.

Delegation means I am lazy.

Rest is weakness.

If my congregation is struggling, I have failed.

These beliefs deserve both theological and psychological examination.

Cognitive-behavioural approaches offer useful strategies for identifying rigid or distorted assumptions, while Christian theology provides resources for examining ministry identity, grace, Sabbath, creaturely limitation, vocation, and stewardship.

The two need not be confused.

Romans 12:2 is not a CBT manual.

CBT is not sanctification.

Yet both recognise that how people interpret reality affects how they live within it.

For a Christian minister, cognitive restructuring may therefore be enriched by theological reflection when undertaken collaboratively and responsibly.

5. Relational and Ministerial Renewal

Clergy resilience is relational.

Jackson-Jordan's (2013) review identifies relationships outside the congregation, peer or mentor relationships, healthy boundaries, and personal spirituality among significant contributors to clergy resilience.

Pastoral renewal must therefore become structural.

The pastor cannot recover through insight alone and then return unchanged to the same unsustainable ministry system.

Practical changes may include:

delegating counselling responsibilities;

establishing protected days off;

creating emergency-call protocols;

taking annual leave;

sharing preaching and leadership responsibilities;

building friendships outside congregational hierarchies;

protecting family time;

limiting unnecessary availability;

developing confidential peer support;

and establishing appropriate referral relationships with mental-health professionals.

Boundaries are not a failure of compassion.

They are what allow compassion to remain available tomorrow.

6. Continuing Formation, Supervision, and Rest

Recovery is rarely maintained by a single retreat.

The final movement of FTIM therefore emphasises continuing formation.

Professional caregivers need supervision.

Pastors deserve no less.

Supervision provides a confidential context in which ministry experiences, emotional responses, ethical concerns, boundary difficulties, countertransference, family pressures, spiritual struggles, and emerging fatigue can be addressed before crisis develops.

Clergy health research supports such a broad ecological understanding of well-being rather than locating responsibility entirely within individual willpower. Proeschold-Bell et al. (2011) identified influences across personal, relational, congregational, institutional, and community levels.

The exhausted pastor should therefore not be told simply to develop better self-care while serving inside an unhealthy system.

Church structures also require examination.

Sabbath as Pastoral Theology

Rest is one of the most neglected theological resources in ministry.

Theologically, Sabbath declares that God remains God while the minister stops working.

That is precisely why rest can become difficult for highly responsible pastors.

To stop requires trust.

Sabbath therefore exposes the hidden theology beneath overwork.

If the pastor believes everything depends upon personal availability, rest feels dangerous.

If ministry is understood as participation in God's work rather than ownership of God's work, rest becomes possible.

Pastoral renewal requires recovering rhythms of work and withdrawal, giving and receiving, speech and silence, public ministry and private personhood.

Rest should not merely occur after collapse.

It should be built into ministry before collapse.

Spirituality as a Resource—But Not a Substitute

Faith-informed pastoral counselling should take spirituality seriously.

Research beyond clergy-specific studies indicates that religious and spiritual resources can be meaningfully incorporated into psychotherapy when they are congruent with clients' own commitments. Captari et al.'s (2018) meta-analysis found support for the integration of clients' religious and spiritual beliefs within psychotherapy.

For pastors, prayer, Scripture, worship, spiritual friendship, silence, retreats, confession, and theological reflection may therefore form meaningful parts of recovery.

But integration requires wisdom.

Prayer should not replace assessment.

Fasting should not replace sleep.

Spiritual warfare language should not obscure depression.

A retreat should not substitute for treatment when psychiatric or medical intervention is required.

Faith should deepen care rather than restrict access to care.

Compassion Fatigue Is Not Moral Failure

Perhaps the most important pastoral message is that emotional depletion is not necessarily evidence of deficient spirituality.

A nervous system can become overwhelmed.

A body can become exhausted.

A counsellor can absorb too many stories of pain.

A pastor can become traumatised by repeated exposure to death, violence, family breakdown, or crisis.

A minister can love God deeply and still become depressed.

A leader can possess genuine faith and still need counselling.

The church harms its shepherds when every expression of distress is translated immediately into sin, demonic attack, or inadequate devotion.

A more gracious theology says:

You may be tired because you have carried too much for too long.

You may need rest.

You may need counselling.

You may need a doctor.

You may need supervision.

You may need boundaries.

You may need someone else to pastor you.

None of those possibilities diminishes the calling.

Implications for African Churches

Clergy well-being cannot remain the private responsibility of pastors.

Church institutions shape the environment within which burnout develops or is prevented.

The Ghanaian findings of Fia et al. (2022) point to organisational realities including resource limitations, competing demands, and multiple responsibilities, reinforcing the need for institutional rather than exclusively individual solutions.

Denominations and churches should therefore develop clergy-care structures that include confidential counselling, regular supervision, mandatory leave, peer-support networks, sabbatical provisions where feasible, family support, realistic role descriptions, referral systems, and education on burnout and compassion fatigue.

Congregations also require pastoral education.

Members should be taught that their pastor is a shepherd, not a messiah.

No minister can be available to everybody at every moment.

Implications for Counsellor Training

Pastoral counsellors working with clergy need more than theological sympathy.

They require clinical competence.

Training should include:

psychopathology;

trauma and secondary traumatic stress;

suicide assessment;

burnout and professional quality of life;

family systems;

boundaries;

spiritual assessment;

cultural competence;

ethical use of Scripture and prayer;

referral;

personality and temperament theory;

and supervision.

Temperament theory may be included as one reflective framework, but students should be taught to distinguish pastoral typologies from empirically validated clinical assessment.

Such academic humility protects both the client and the credibility of Christian counselling.

A Research Agenda for FTIM

The Faith–Temperament Integration Model requires empirical investigation.

Its usefulness should not be assumed simply because it is theologically attractive.

Future research could examine whether temperament-informed pastoral counselling contributes to:

reduced burnout;

improved professional quality of life;

better boundary-setting;

increased compassion satisfaction;

improved emotional regulation;

enhanced clergy-family functioning;

greater help-seeking;

improved ministry satisfaction;

and sustained pastoral resilience.

Mixed-method studies would be particularly valuable.

Quantitative measures could assess burnout, secondary traumatic stress, depression, anxiety, resilience, and quality of life.

Qualitative interviews could explore how pastors understand fatigue, calling, temperament, spirituality, congregational expectation, rest, and healing.

The role of the APS itself also warrants independent investigation if it is to be used beyond pastoral self-reflection.

This is an important scholarly boundary: the FTIM can be proposed now as a conceptual pastoral model, while claims of effectiveness must await evidence.

Limitations

This article is conceptual rather than empirical.

The pastoral illustrations in the source manuscript arise from counselling and ministry reflection and should not be interpreted as controlled clinical evidence.

The temperament framework is likewise employed pastorally rather than diagnostically.

Furthermore, "African pastoral ministry" represents enormous denominational, theological, ethnic, linguistic, gender, socioeconomic, and cultural diversity. Ghanaian Pentecostal or Charismatic experiences should not be assumed to represent every African ministry context.

Finally, compassion fatigue, burnout, depression, secondary traumatic stress, and spiritual exhaustion can overlap but should not be treated as interchangeable clinical constructs.

These limitations provide directions for further research rather than reasons to abandon the conversation.

Conclusion

Pastors are called to care.

They are not called to become inexhaustible.

The Church has sometimes celebrated sacrifice while failing to ask whether its shepherds are quietly disappearing beneath the weight of that sacrifice.

A wounded healer can still heal.

But the wounded healer also needs a place where the clerical title may be set down.

A place where the preacher does not need to preach.

Where the counsellor does not need to counsel.

Where the strong person is not required to remain strong.

Where grief may be spoken.

Where fatigue may be admitted.

Where temperament may be understood.

Where boundaries may be rebuilt.

Where psychological care does not threaten faith.

Where prayer accompanies truth instead of hiding it.

Where the pastor can once again become simply a person in need of grace.

The Faith–Temperament Integration Model proposes that pastoral renewal involves spiritual grounding, self-understanding, emotional processing, renewed patterns of thought, relational restructuring, supervision, and sustainable rhythms of care.

Its deepest message, however, is simpler.

The shepherd must also be shepherded.

Pastoral self-care is not selfishness.

Boundaries are not abandonment.

Rest is not laziness.

Counselling is not evidence of weak faith.

And receiving care is not a retreat from calling.

It is stewardship of the person through whom the calling must continue.

When pastors learn to minister from replenished lives rather than depleted identities, compassion may again become what it was meant to be—not the slow destruction of the caregiver, but the life-giving sharing of mercy.

The healing of the church therefore includes the healing of its shepherds.

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